POWER MIDDLE SCHOOL
34740 RHONSWOOD
FARMINGTON HILLS, MI 48335
248-489-3626 Fax: 248-489-3628

PERMISSION FOR RELEASE OF STUDENT RECORDS

Records are requested for professional use by Power Middle School in order to plan an appropriate education program for the student named below:

STUDENT'S FULL NAME _____

BIRTHDATE _____ GRADE _____ UIC # _____

DATE OF ENROLLMENT _____

Please send records to: Guidance Office
Power Middle School
34740 Rhonswood
Farmington Hills, MI 48335

Information to be released:

☐ Educational Record (grades, attendance, standardized testing, immunization records, health, honors and awards

☐ Confidential Information (medical psychiatric, psychological, social, IEP)

NAME OF PREVIOUS SCHOOL _____

ADDRESS OF PREVIOUS SCHOOL _____
(number) (street name)

Phone _____ _____
(City) (State) (Zip)

Fax _____

Parent/Guardian Signature _____ Date _____